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## \*BIBDATASHEET\*

CONFIRMATION NO. 8191

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/815,160	<b>FILING OR 371(c) DATE</b> 03/31/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> 4391 CIP II	
<b>APPLICANTS</b> Brain E. Dalton, Erie, PA;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/731,625 12/09/2003 which is a CIP of 10/615,196 07/07/2003					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b> <b>** 06/10/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Signature]</i> Initials <i>[Signature]</i>		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 23122					
<b>TITLE</b> Bone fixation assembly and method of securement					
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		